

PRINTER RUSH
(PTO ASSISTANCE)

Application : 10691892 Examiner : smith GAU : 3644
From : ewc Location : IDC FMF FDC Date : 02/06/06

Tracking #: epm 10691892 Week Date: 12-19-05

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449		<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS		<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM		<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW		<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW		<input type="checkbox"/> Other
<input type="checkbox"/> DRW		
<input checked="" type="checkbox"/> OATH	<u>11-23-03</u>	
<input type="checkbox"/> 312		
<input type="checkbox"/> SPEC		

[RUSH] MESSAGE:

Residence for inventor is not listed
on oath. Thank you

[XRUSH] RESPONSE:

Residence address is listed on oath filed and scanned
10/23/03 query not required

INITIALS: JS

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04


PTO/SB/01 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032

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<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Billy				Family Name or Surname Rabello	
Inventor's Signature				Date	
Residence: City San Pedro		State CA		Citizenship USA	
Mailing Address 1028 West 15th Street					
City San Pedro		State CA		ZIP 90731	
NAME OF SECOND INVENTOR:				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])				Family Name or Surname	
Inventor's Signature <i>Billy Rabello</i>				Date 10/21/03	
Residence: City		State		Citizenship	
Mailing Address					
City		State		ZIP	
Country					
<input type="checkbox"/> Additional inventors or a legal representative are being named on the supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					